



Since 1889

CITY OF

MILTON-FREEWATER

P.O. Box 6, Milton-Freewater, OR 97862 • Phone (541)938-5531 • Fax (541)938-8224

Customer Name _____ Account# _____
 Mailing Address _____
 Project Address _____
 Phone _____ Installer _____

| Window # | Area (sq ft) | Window # | Area (sq ft) | Window # | Area (sq ft) |
|----------|--------------|----------|--------------|----------------------------|--------------|
| 1 | _____ | 6 | _____ | 11 | _____ |
| 2 | _____ | 7 | _____ | 12 | _____ |
| 3 | _____ | 8 | _____ | 13 | _____ |
| 4 | _____ | 9 | _____ | 14 | _____ |
| 5 | _____ | 10 | _____ | 15 | _____ |
| | | | | Total | _____ |
| | | | | Rebate \$3.00/ square foot | _____ |

Please provide a rough sketch of the home with each window numbered and the corresponding area filled in the table above.

Customer Signature _____

Date _____